



State of Wisconsin
Department of Health and Family Services

Jim Doyle, Governor
Helene Nelson, Secretary

December 16, 2005

Dear Colleague:

We at the Department of Health and Family Services are strengthening our efforts to work with public health, health care, and community leaders to eliminate racial and ethnic disparities in infant mortality and to assure the best outcomes for all mothers and babies in Wisconsin. Dr. Sheri Johnson, Administrator of the Division of Public Health and State Health Officer, will develop and lead our Department-wide strategy to advance this goal, at the request of Secretary Helene Nelson, in collaboration with all DHFS divisions and many other partners. Dr. Johnson is instituting a five-year action plan to build an enduring scaffold of solutions to what is one of the most persistent and pernicious public health problems in Wisconsin and our nation.

We are writing to tell you about this project to engage your continuing and increased collaboration in confronting the racial disparities in birth outcomes in our state. Infant mortality, defined as the number of infants who die before their first birthday per 1,000 live births, is a critical indicator of the health of a community. Wisconsin's white infant mortality rate is one of the best in the nation, and for white infants, we have met the national 2010 goal of 4.5 infant deaths per 1,000 live births.

However, we have much work to do to improve the birth outcomes for Wisconsin's racial and ethnic minority communities. As of 2004, African American infants in Wisconsin died at a rate of 19.2 per 1,000. This rate is 4.3 times the rate for white infants, a disparity that is as high as any other in the country for the states that report African American infant mortality. For the most recent three-year period, the rate of infant death among American Indians was 9.0, twice that of white infants. Improvements are also needed for Laotian/Hmong infants, with a rate of 8.3, and among Hispanic infants, with a rate of 6.2.

During the past few years, the Department has joined with partners throughout the state to raise awareness of the racial and ethnic disparities in Wisconsin's birth outcomes. We have learned that racial and ethnic disparities are the consequences of disadvantages and inequities over an entire life course, including the increasing role that stress plays in producing poor outcomes. Intervention strategies are needed that are locally driven and community based. Research efforts are needed that target differing risk exposures over the entire life course of a woman.

While we still need more research on best practices, and we need to devise action plans that are locally driven, we have the benefit of studies to show us some intervention strategies that will contribute to solving the problem. Research has demonstrated a number of evidence-based interventions that work to improve birth outcomes: taking folic acid to prevent neural tube defects; smoking cessation to prevent low birth weight; cessation of alcohol and other drug consumption to prevent fetal alcohol syndrome and other harmful fetal effects; treating infections before and during pregnancy to reduce pre-term labor; good nutrition, control of diabetes and blood pressure; and placing an infant in a safe sleep environment, on its back, in order to reduce the chances of sudden infant death. The focus of our five-year plan will be to put these evidence-based interventions into practice at a scale that will make a real difference in the disparity statistics.

To address strengths and needs for improving birth outcomes and reducing health disparities, we have outlined the following Departmental initiatives for the coming year:

- Coordinate a statewide awareness campaign on healthy birth outcomes.

- Develop internal Department quality improvement processes, including Medicaid eligibility and services for newborns and pregnant women, tracking high-risk women, coordination with family planning, teen pregnancy prevention, and STD/HIV services.
- Deploy community and evidence-based practices that eliminate disparities, in more places and at greater scale.
- Monitor statewide and local trends in low birth weight, prematurity, and SIDS, and evaluate the effectiveness of interventions.

In January, the Department is convening a meeting with health care and other stakeholders to focus on how we can assure pregnant women and infants are made eligible for Medical Assistance and receive health care that is so important for healthy births and early development. Invitations will be issued soon. Also in January, the Department will hold the second meeting of a data and research work group involving the Medical College of Wisconsin, UW-Madison, UW-Milwaukee, and the Milwaukee City Health Department. We are pleased that this group is committed to working with us to make sure that our work is data-driven and its effectiveness is monitored and evaluated.

We will be regularly seeking to engage partners in these key initiatives, so together we can develop and deploy the actions that are needed to achieve better outcomes. We invite you to consider how you might join with us in these initiatives. Feel free to share your ideas with Dr. Johnson or her staff within the Division of Public Health who will be managing these efforts. Kelli Jones, Minority Health Officer, and Patrice Onheiber, Maternal and Child Health Supervisor, will manage the day-to-day operation of the overall action plan with many other staff from throughout our Department engaged in particular efforts.

Please contact Ms. Jones at (608) 267-2173 or (414) 227-4926 joneskj@dhfs.state.wi.us or Ms. Onheiber at (608) 266-3894 onheipm@dhfs.state.wi.us with your interest or with any additional ideas. As a way of communicating our progress, we have established a website: <http://dhfs.wisconsin.gov/healthybirths/> dedicated to this initiative. You will find a fuller description of the planning project charter on the website now, with other information added as the project unfolds. Please forward your email address to Jennifer Potts at pottsj@dhfs.state.wi.us if you would like to receive further communication from us on this initiative.

We look forward to working with you as we embark on this critical task.

Sincerely,



Helene Nelson
Secretary



Sheri Johnson, Ph.D., Administrator
Division of Public Health